

CAMEO CARE CENTER

5790 SOUTH 27TH STREET

MILWAUKEE 53221

Phone:(414) 282-1300

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/05): 103

Total Licensed Bed Capacity (12/31/05): 112

Number of Residents on 12/31/05: 95

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Corporation

Skilled

No

Yes

Yes

94

Age, Gender, and Primary Diagnosis of Residents (12/31/05)		Length of Stay (12/31/05)	%
Primary Diagnosis	%	Age Groups	%
Developmental Disabilities	0.0	Under 65	9.5
Mental Illness (Org./Psy)	24.2	65 - 74	22.1
Mental Illness (Other)	37.9	75 - 84	42.1
Alcohol & Other Drug Abuse	0.0	85 - 94	20.0
Para-, Quadra-, Hemiplegic	7.4	95 & Over	6.3
Cancer	0.0		100.0
Fractures	0.0		
Cardiovascular	10.5	65 & Over	90.5
Cerebrovascular	7.4		
Diabetes	2.1	Gender	%
Respiratory	1.1		
Other Medical Conditions	9.5	Male	26.3
	100.0	Female	73.7
			100.0

Primary Diagnosis		%	Age Groups		%	Length of Stay (12/31/05)		%
Developmental Disabilities		0.0	Under 65		9.5	Less Than 1 Year		40.0
Mental Illness (Org./Psy)		24.2	65 - 74		22.1	1 - 4 Years		37.9
Mental Illness (Other)		37.9	75 - 84		42.1	More Than 4 Years		22.1
Alcohol & Other Drug Abuse		0.0	85 - 94		20.0			100.0
Para-, Quadra-, Hemiplegic		7.4	95 & Over		6.3			
Cancer		0.0				Full-Time Equivalent		
Fractures		0.0				Nursing Staff per 100 Residents		
Cardiovascular		10.5	65 & Over		90.5	(12/31/05)		
Cerebrovascular		7.4				RN's		8.4
Diabetes		2.1	Gender		%	LPN's		12.9
Respiratory		1.1				Nursing Assistants,		
Other Medical Conditions		9.5	Male		26.3	Aides, & Orderlies		47.9
		100.0	Female		73.7			
					100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	7	12.3	153	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	7	7.4
Skilled Care	17	100.0	325	50	87.7	131	0	0.0	0	8	100.0	190	12	100.0	131	1	100.0	88	92.6
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	17	100.0		57	100.0		0	0.0		8	100.0		12	100.0		1	100.0	95	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	10.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.0	Bathing	0.0	42.1	57.9	95
Other Nursing Homes	11.9	Dressing	3.2	49.5	47.4	95
Acute Care Hospitals	74.3	Transferring	17.9	53.7	28.4	95
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	11.6	49.5	38.9	95
Rehabilitation Hospitals	3.0	Eating	57.9	24.2	17.9	95
Other Locations	0.0	*****				
Total Number of Admissions	101	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	5.3		Receiving Respiratory Care	4.2
Private Home/No Home Health	13.0	Occ/Freq. Incontinent of Bladder	67.4		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	9.0	Occ/Freq. Incontinent of Bowel	49.5		Receiving Suctioning	0.0
Other Nursing Homes	9.0				Receiving Ostomy Care	2.1
Acute Care Hospitals	27.0	Mobility			Receiving Tube Feeding	7.4
Psych. Hosp.-MR/DD Facilities	1.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	40.0
Rehabilitation Hospitals	1.0					
Other Locations	2.0	Skin Care			Other Resident Characteristics	
Deaths	33.0	With Pressure Sores	16.8		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	3.2		Medications	
(Including Deaths)	100				Receiving Psychoactive Drugs	73.7

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	83.9	85.1	0.99	84.6	0.99	86.5	0.97	88.1	0.95
Current Residents from In-County	92.6	82.7	1.12	87.4	1.06	84.9	1.09	77.6	1.19
Admissions from In-County, Still Residing	35.6	15.8	2.26	17.0	2.10	17.5	2.04	18.1	1.97
Admissions/Average Daily Census	107.4	247.5	0.43	221.6	0.48	200.9	0.53	162.3	0.66
Discharges/Average Daily Census	106.4	250.7	0.42	225.9	0.47	204.0	0.52	165.1	0.64
Discharges To Private Residence/Average Daily Census	23.4	109.5	0.21	100.1	0.23	86.7	0.27	74.8	0.31
Residents Receiving Skilled Care	100	96.3	1.04	97.0	1.03	96.9	1.03	92.1	1.09
Residents Aged 65 and Older	90.5	84.6	1.07	90.1	1.01	90.9	1.00	88.4	1.02
Title 19 (Medicaid) Funded Residents	60.0	59.3	1.01	55.5	1.08	55.0	1.09	65.3	0.92
Private Pay Funded Residents	8.4	13.3	0.63	21.9	0.38	22.5	0.37	20.2	0.42
Developmentally Disabled Residents	0.0	1.9	0.00	1.2	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	62.1	29.4	2.11	28.6	2.17	31.0	2.00	32.9	1.89
General Medical Service Residents	9.5	26.5	0.36	30.3	0.31	26.5	0.36	22.8	0.42
Impaired ADL (Mean)	60.4	53.7	1.12	52.9	1.14	52.3	1.15	49.2	1.23
Psychological Problems	73.7	53.4	1.38	56.3	1.31	58.3	1.26	58.5	1.26
Nursing Care Required (Mean)	9.2	7.7	1.20	6.9	1.34	7.3	1.26	7.4	1.24